

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Applicants : C. MEARS et al.

Appln. No. : 09/763,089

Filed : February 16, 2001

For : APPLICATOR AND DEVICE  
USING SAME

Atty. Dkt. : 29925-169801

SUBMISSION OF  
DECLARATIONS

Customer No.



26694

PATENT TRADEMARK OFFICE

January 18, 2002

Assistant Commissioner for Patents

Box PCT

Washington, D.C. 20231

Attn: Office of PCT Legal Administration

Sir:

RECEIVED

05 FEB 2002

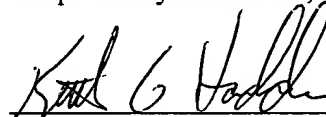
In Response to the Notification dated December 18, 2001, Applicants submit the enclosed additional copies of the declaration. Each of the enclosed copies includes the entire declaration document. In addition, Mr. Zissel has initialed and dated the corrections to his name and citizenship. Applicants note that some of the inventors returned signed copies by facsimile that included only the page with the individual's signature, although the entire declaration is included herewith. Undersigned counsel represents that each and every inventor was in possession of and executed a complete copy of the declaration. Accordingly, Applicants submit that the attached declaration fully complies with the applicable rules.

Regarding inventor Ralf Zissel, applicants note that Mr. Zissel is the same individual named as an inventor on the published international application. Mr. Zissel's name was spelled incorrectly on the cover of the published international application. This was corrected during prosecution of the international application as evidenced by the enclosed RESPONSE TO

INVITATION TO CORRECT DEFECTS IN THE INTERNATIONAL APPLICATION that was filed by prior counsel on October 18, 1999. However, the published international application still included the error in the spelling of Mr. Zissel's name.

Applicants respectfully submit that the application is complete and request examination on the merits. Should any fee be required with this submission, the Commissioner is hereby authorized to charge such fee to Deposit Account No. 22-0261.

Respectfully submitted,



Keith G. Haddaway

Registration No. 46,180

VENABLE

P.O. Box 34385

Washington, D.C. 20043-9998

Telephone: (202) 962-4800

Direct Dial: (202) 216-8009

Telefax: (202) 962-8300

KGH/sat

::ODMA\PCDOCS\DC2DOCS1\345821\1

DECLARATION FOR UNITED STATES PATENT APPLICATION,  
POWER OF ATTORNEY, DESIGNATION OF CORRESPONDENCE ADDRESS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled APPLICATOR AND DISPENSING DEVICE USING SAME, the specification of which

[X] was filed on February 16, 2001 as Application No. 09/763,089 and as a continuation application filed under the Patent Cooperation Treaty on August 18, 1999, as Application No. PCT/US99/18738, the United States of America being designated.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent, utility model, design or inventor's certificate listed below and have also identified below any foreign application(s) for patent, utility model, design or inventor's certificate having a filing date before that of the application(s) on which priority is claimed:

Prior Foreign Application(s) \_\_\_\_\_ Priority Claimed \_\_\_\_\_

I hereby appoint the registered attorneys and agents of VENABLE associated with the following customer number to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:



26694

PATENT TRADEMARK OFFICE

VENABLE is located at Suite 1000, 1201 New York Avenue, N.W., Washington, D.C. 20005-3917, Telephone: (202) 962-4800, Telefax: (202) 962-8300. Address all correspondence to VENABLE, Post Office Box 34385, Washington, D.C. 20043-9998.

The undersigned hereby authorizes the U.S. attorneys and agents named herein to accept and follow instructions from the undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorneys or agents named herein will be so notified by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_.

Joint Inventor: Christopher MEARS

Citizenship: USA

Residence and Post Office Address: 200 West 81<sup>st</sup> Street, Apt. 32  
New York, NY 10024

Signature: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_.

Joint Inventor: Richard GRAY


Citizenship: USA

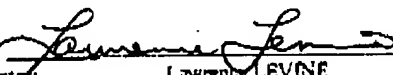
Residence and Post Office Address: 150 Central Park South, Suite 3210  
New York, NY 10019

Attorney Docket: **29925-169801**  
Page 2

DECLARATION FOR UNITED STATES PATENT APPLICATION  
POWER OF ATTORNEY, DESIGNATION OF CORRESPONDENCE ADDRESS

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ 200\_  
Joint Inventor: Ralph Zissel  
Citizenship: USA  
Residence and Post Office Address: 107 Hollyhock Lane  
Monroeville, NC 28117

Signature:  Date: 05-27 2001  
Joint Inventor: Harvey LEVINE  
Citizenship: USA  
Residence and Post Office Address: 255 Woodside Circle  
Fairfield, CT 06432

Signature:  Date: 6-25 2001  
Joint Inventor: Lawrence LEVINE  
Citizenship: USA  
Residence and Post Office Address: 3 Austin Drive Extension  
Easton, CT 06612

#288785

DECLARATION FOR UNITED STATES PATENT APPLICATION,  
POWER OF ATTORNEY, DESIGNATION OF CORRESPONDENCE ADDRESS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled APPLICATOR AND DISPENSING DEVICE USING SAME, the specification of which

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Prior Foreign Application(s)

Priority Claimed

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26694

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_.

Joint Inventor: Christopher MEARS

Citizenship: USA

Residence and Post Office Address: 200 West 81<sup>st</sup> Street, Apt. 32  
New York, NY 10024

Signature: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_.

Joint Inventor: Richard GRAY

Citizenship: USA

Residence and Post Office Address: 150 Central Park South, Suite 3210  
New York, NY 10019

Attorney Docket: 29925-169801

Page 2

DECLARATION FOR UNITED STATES PATENT APPLICATION  
POWER OF ATTORNEY, DESIGNATION OF CORRESPONDENCE ADDRESS

Signature: \_\_\_\_\_

Date: JAN. 18, 2002Joint Inventor: German Ralph ZyselCitizenship: USA Ralph 1/18/02Residence and Post Office Address: 107 Hollyhock Lane  
 Mooresville, NC 28117

Signature: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_.

Joint Inventor: Harvey LEVINECitizenship: USAResidence and Post Office Address: 255 Woodside Circle  
Fairfield, CT 06432

Signature: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_.

Joint Inventor: Lawrence LEVINECitizenship: USAResidence and Post Office Address: 3 Austin Drive  
Easton, CT 06612

#288785

Attorney Docket 29923-169801

DECLARATION FOR UNITED STATES PATENT APPLICATION,  
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26694

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Signature: C. Mears  
Joint Inventor: Christopher MEARS  
Citizenship: USA  
Residence and Post Office Address: 200 West 81<sup>st</sup> Street, Apt. 32  
New York, NY 10024

Date: 15<sup>th</sup> June, 2001.

Signature: \_\_\_\_\_  
Joint Inventor: Richard GRAY  
Citizenship: USA  
Residence and Post Office Address: 150 Central Park South, Suite 3210  
New York, NY 10019

Date: \_\_\_\_\_, 200  .

Attorney Docket: 29925-169801  
Page 2

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Joint Inventor: Ralph Zissel  
Citizenship: USA  
Residence and Post Office Address: 107 Hollyhock Lane  
Mooresville, NC 28117

Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 200\_\_  
Joint Inventor: Harvey LEVINE  
Citizenship: USA  
Residence and Post Office Address: 255 Woodside Circle  
Fairfield, CT 06432

Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 200\_\_  
Joint Inventor: Lawrence LEVINE  
Citizenship: USA  
Residence and Post Office Address: 3 Austin Drive  
Easton, CT 06612

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Attorney Docket 29925-169801

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_.

Joint Inventor: Christopher MEARS

Citizenship: USA

Residence and Post Office Address: 200 West 81<sup>st</sup> Street, Apt. 32  
New York, NY 10024

Signature: Richard F. Gray

Date: 6/15/, 2001.

Joint Inventor: Richard GRAY

Citizenship: USA

Residence and Post Office Address: 150 Central Park South, Suite 3210  
New York, NY 10019

06/15/01 16:25 FAX 212 247 22

RICHARD F. GRAY

ENABLE

003

06/15/01 16:21 202 982 8300

VENABLE

003

Attorney Docket: 29925-169801

Page 2

DECLARATION FOR UNITED STATES PATENT APPLICATION  
POWER OF ATTORNEY, DESIGNATION OF CORRESPONDENCE ADDRESS

Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 200\_\_  
Joint Inventor: Ralph Zissel  
Citizenship: USA  
Residence and Post Office Address: 107 Hollyhock Lane  
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 200\_\_  
Joint Inventor: Harvey LEVINE  
Citizenship: USA  
Residence and Post Office Address: 255 Woodside Circle  
Fairfield, CT 06432

Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 200\_\_  
Joint Inventor: Lawrence LEVINE  
Citizenship: USA  
Residence and Post Office Address: 3 Austin Drive  
Easton, CT 06612

#288785

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

-----000:0:000-----

Application of :  
ARICH INC. :  
International Application :  
No. PCT/US99/18738 :  
International Filing Date: :  
18 August 1999 :  
Title: APPLICATOR AND :  
DISPENSING :  
DEVICE USING :  
SAME : Attorney's Ref: A008-3221PCT

-----000:0:000-----

ASSISTANT COMMISSIONER FOR PATENTS  
Box PCT  
Washington, DC 20231

Attn: RO/US

RESPONSE TO INVITATION TO CORRECT DEFECTS  
IN THE INTERNATIONAL APPLICATION

S I R:

In response to the Invitation to Correct Defects in the International Application (Form PCT/RO/106) mailed 16 September 1999 ("Invitation"), applicant responds as follows:

Defect -- Omission of Power of Attorney

In Annex A to the Invitation, it was noted that the Request was signed by applicant's attorney but no power of attorney appointing the attorney was filed.

Reply

To overcome this defect, applicant submits herewith a power of attorney for the international application, duly signed by each inventor and by applicant.

Defect -- Informal Drawings

In Annex C1 to the Invitation, the drawings were objected to because the sheets are not consecutively numbered and because the drawings are not executed in durable black color with well-defined and uniformly thick lines.

Reply

To overcome the drawing objections, seven replacement sheets of drawing are submitted herewith, the sheets being consecutively numbered and executed in well-defined and uniformly thick lines.

Additional Correction

On sheet no. 2 of the Request, the first name and part of the address of one of the inventors/applicants was incorrectly listed as ZISSEL, Ralph (instead of Ralf), 107 Howlly Cock Lane (instead of Hollycock Lane) with a zip code of 28118 (instead of 28117).

To correct this error, a replacement sheet no. 2 containing the correct information is submitted herewith together with a red-marked copy of original sheet no. 2 showing the corrections marked in red.

In view of the foregoing, the international application is now believed to be in proper formal condition. However, should it be determined that informalities still exist, it is respectfully requested

that the undersigned attorney be notified of such whereupon they will be promptly corrected.

Respectfully submitted,

ADAMS & WILKS  
Attorneys for Applicant

By: 


Bruce L. Adams  
Reg. No. 25,386

50 Broadway  
31st Floor  
New York, NY 10004  
(212) 809-3700

MAILING CERTIFICATE

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: ASSISTANT COMMISSIONER FOR PATENTS, Box PCT, Washington, DC 20231, Attn: RO/US on the date indicated below.

Bruce L. Adams  
Name

  
Signature

October 18, 1999  
Date

## PCT

## POWER OF ATTORNEY

(for an international application filed under the Patent Cooperation Treaty)

(PCT Rule 90.4)

The undersigned applicant(s) (Names should be indicated as they appear in the request):

ARICH INC.; MEARS, Christopher; GRAY, Richard F.; ZISSEL, Ralf

hereby appoints (appoint) the following person as:

☒ agent☐ common representative

Name and address

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

ADAMS, Bruce L.  
ADAMS & WILKS  
50 Broadway-31st Floor  
New York, NY 10004  
United States of America

to represent the undersigned before

☒ all the competent International Authorities☐ the International Searching Authority only☐ the International Preliminary Examining Authority only

in connection with the international application identified below:

Title of the invention: APPLICATOR AND DISPENSING DEVICE USING SAME

Applicant's or agent's file reference: A008-3221PCT

International application number (if already available): PCT/US99/18738

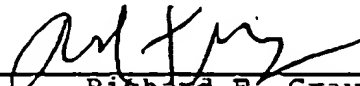
filed with the following Office

USPTO

as receiving Office

and to make or receive payments on behalf of the undersigned.

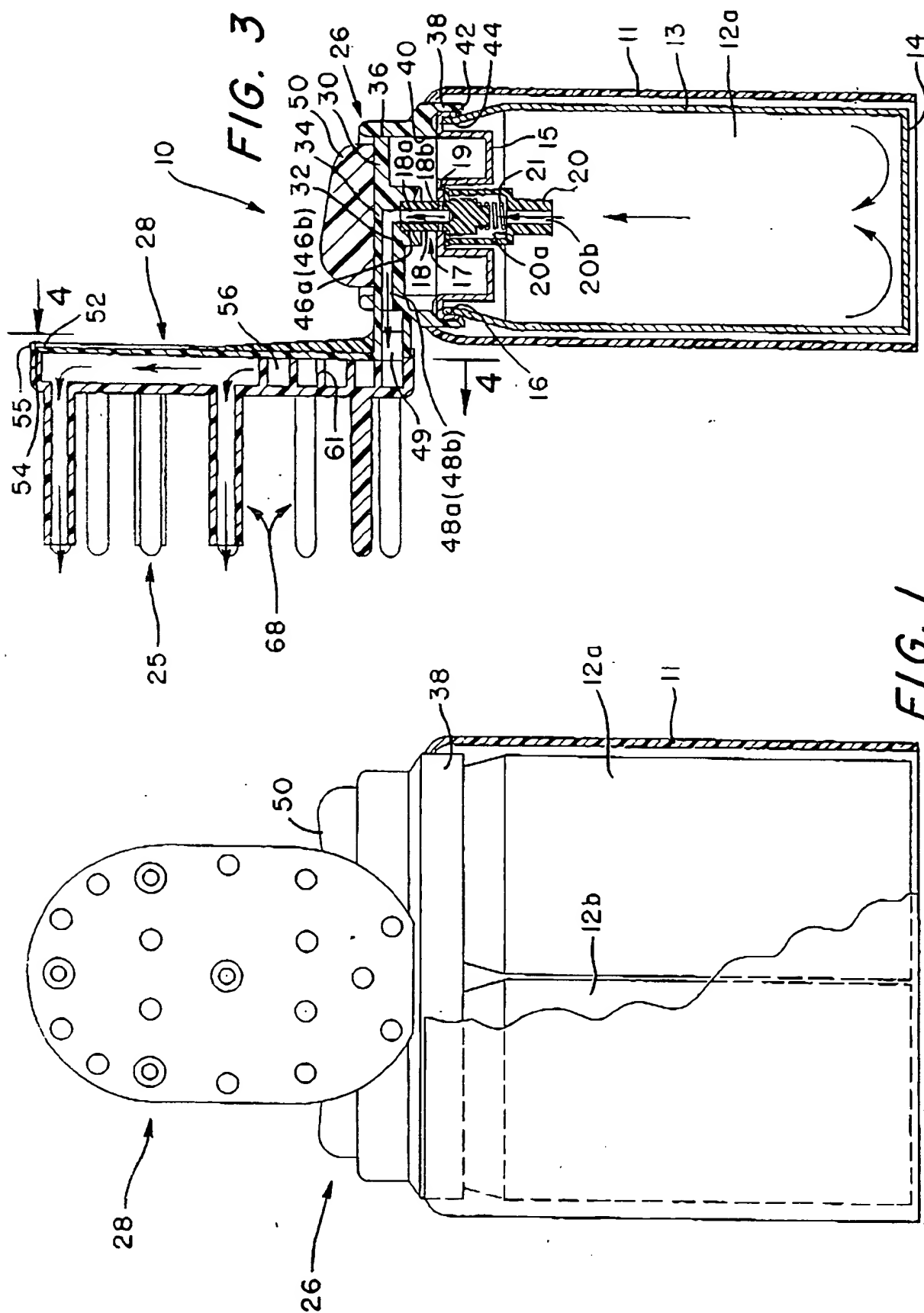
Signature of the applicant(s) (where there are several applicants, each of them must sign; next to each signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading the request or this power);

  
Christopher Mears  
Richard F. Gray  
Ralf Zissel

Date: October 1, 1999

President of ARICH  
INC. and individually

1/7



2/7

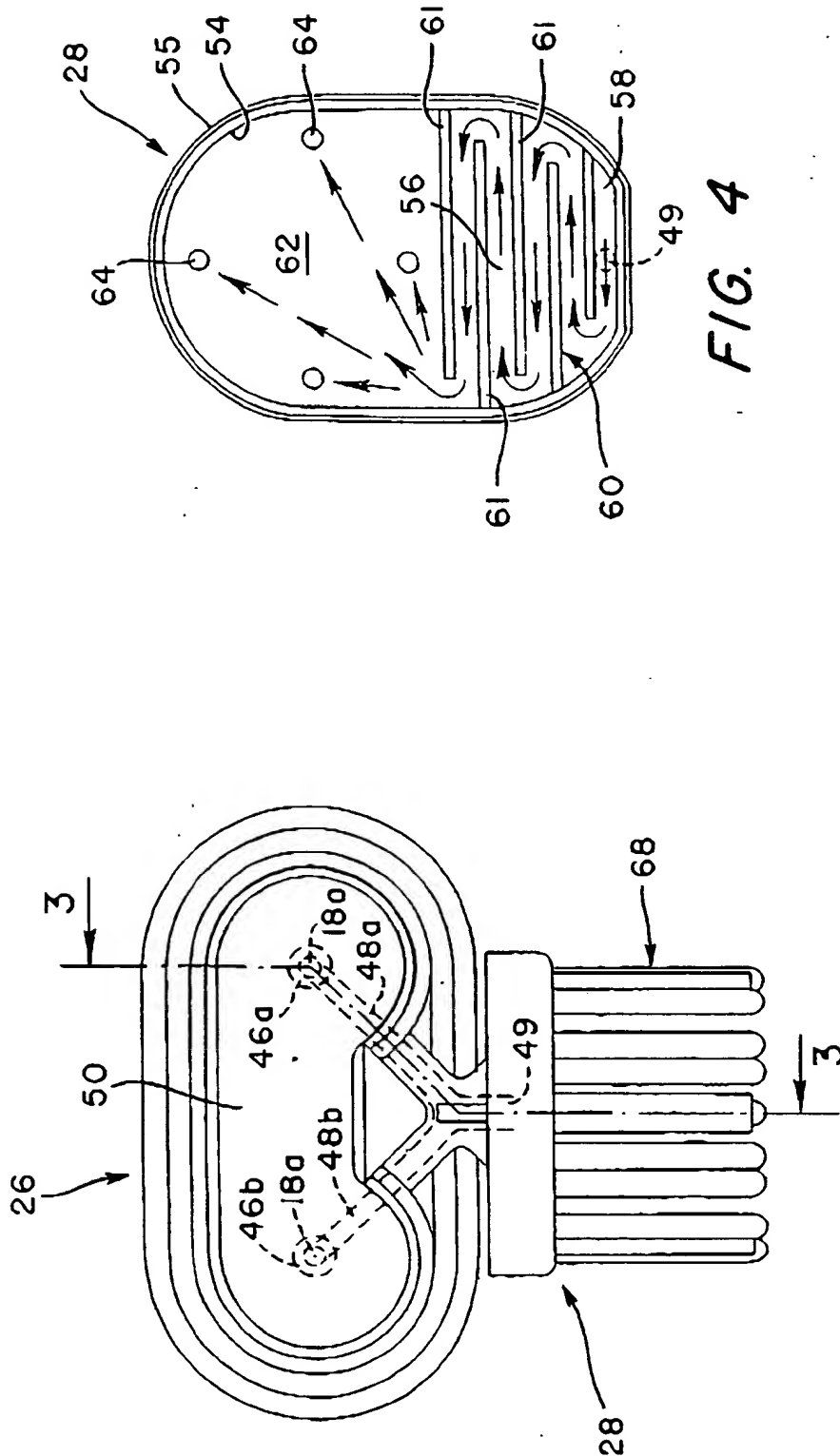


FIG. 2

FIG. 4



3/7

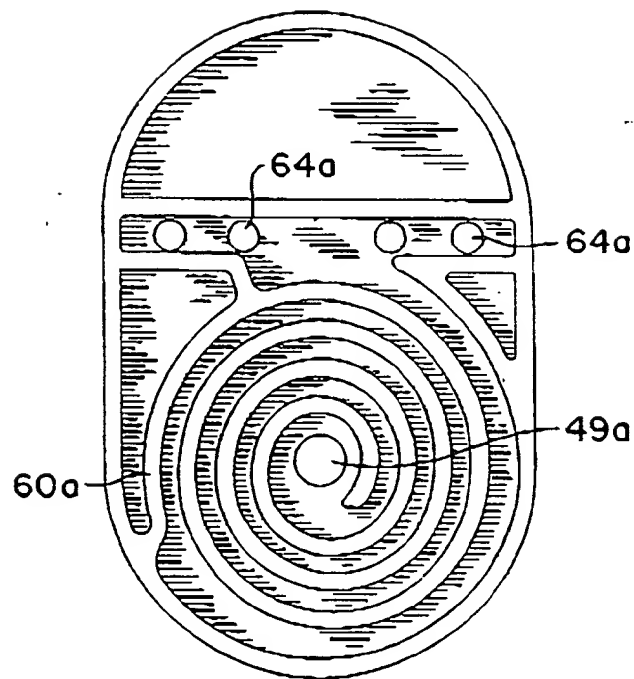


FIG. 5

4/7

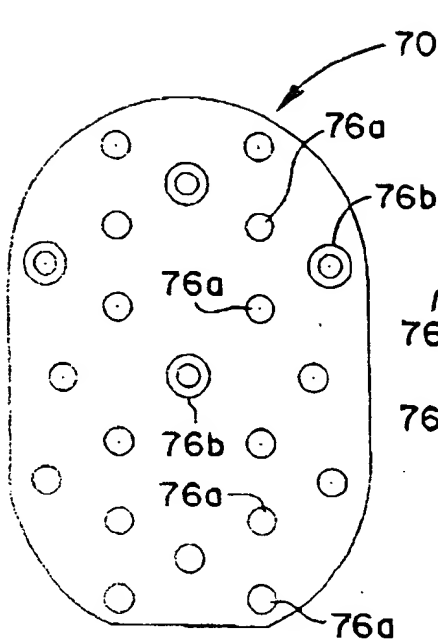


FIG. 6

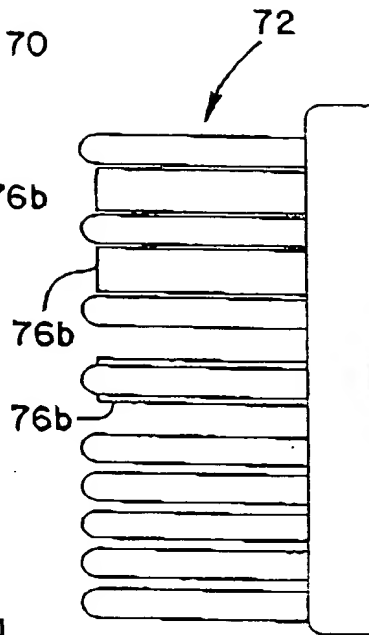


FIG. 7

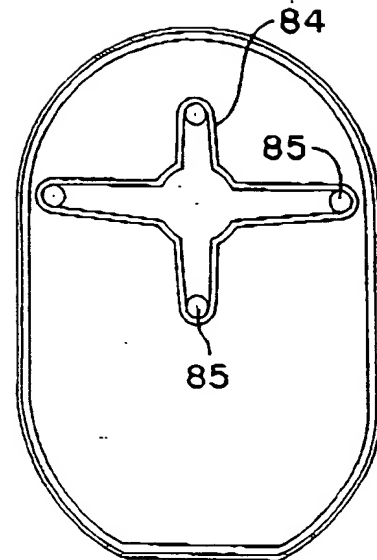


FIG. 8

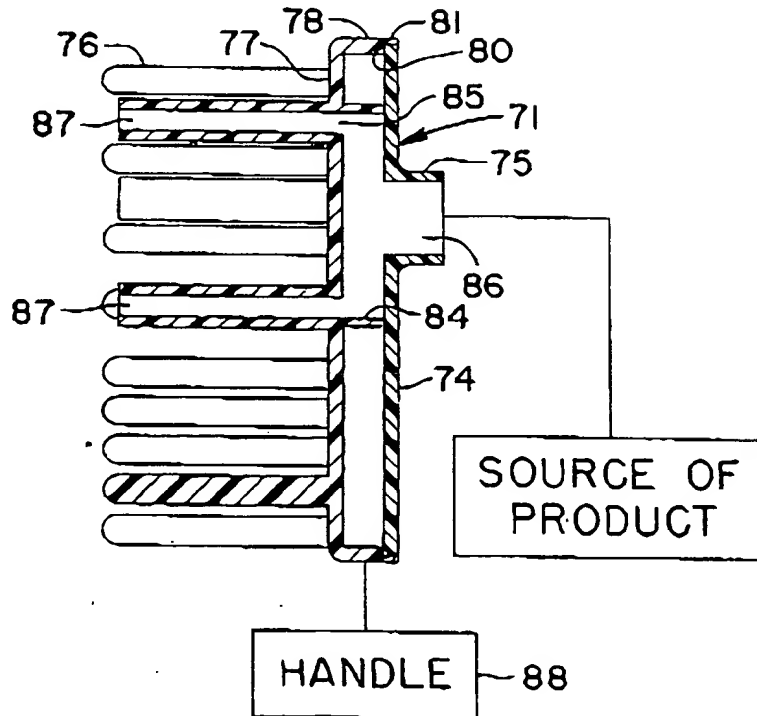


FIG. 9

5/7

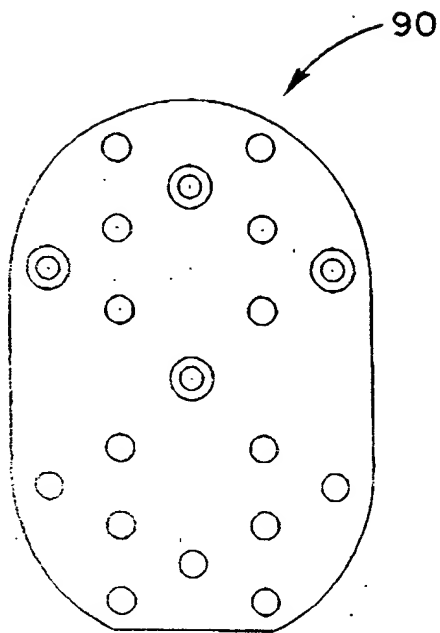


FIG. 10

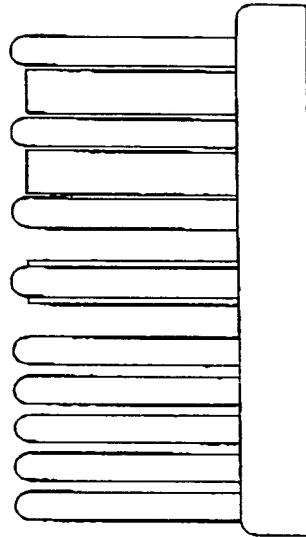


FIG. 11

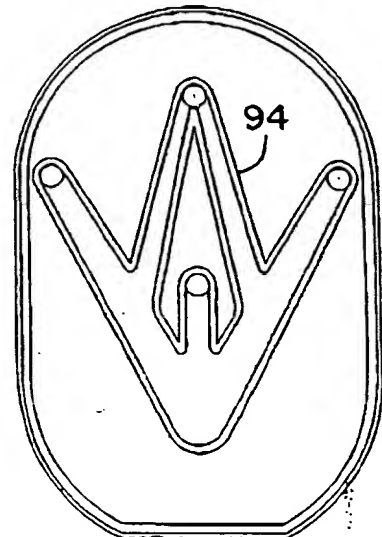


FIG. 12

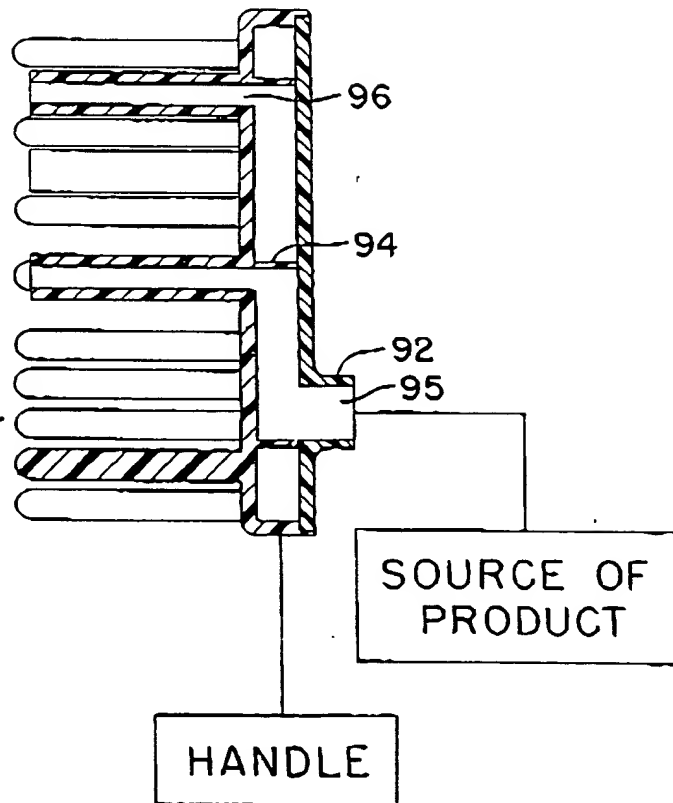


FIG. 13

6/7

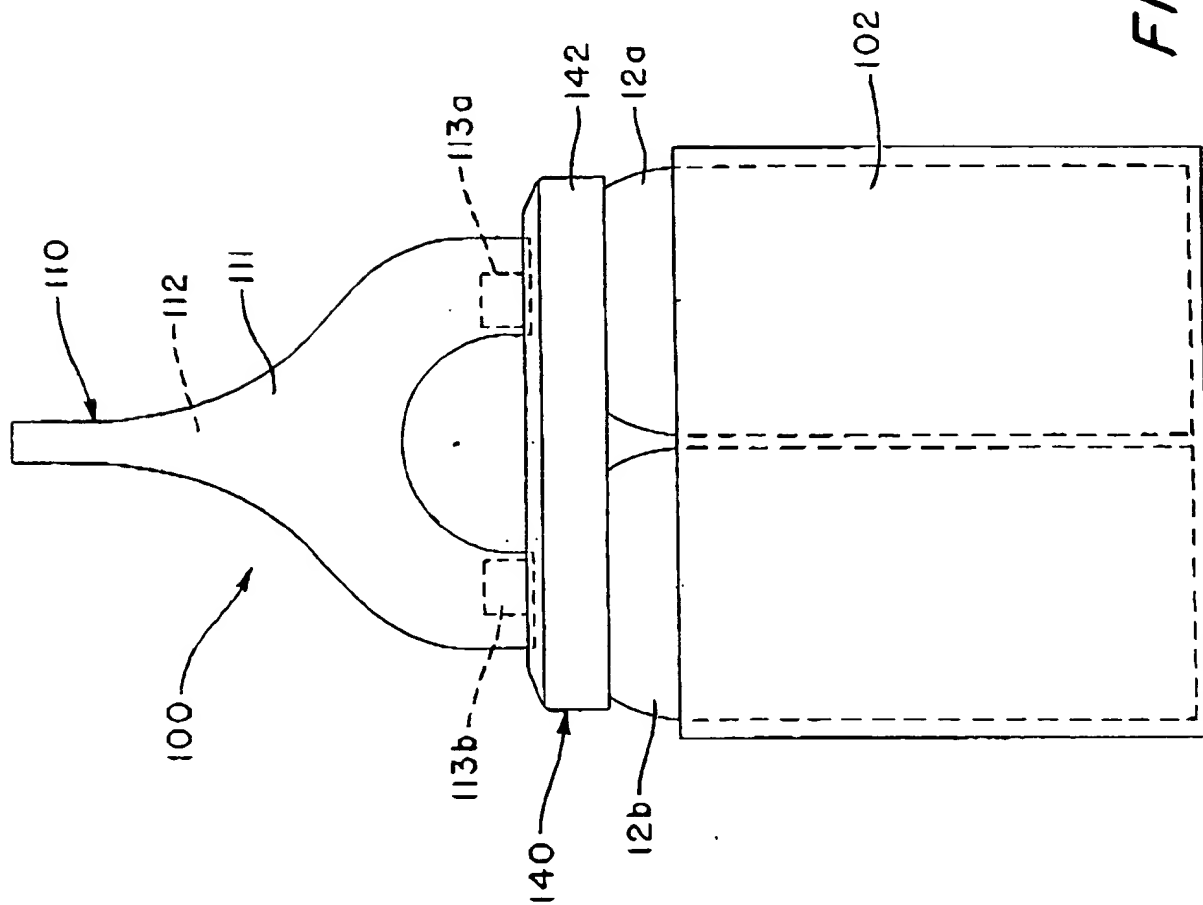


FIG. 14

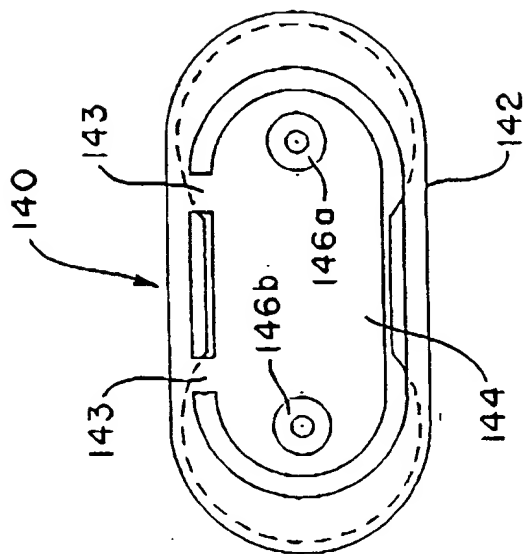


FIG. 15

7/7

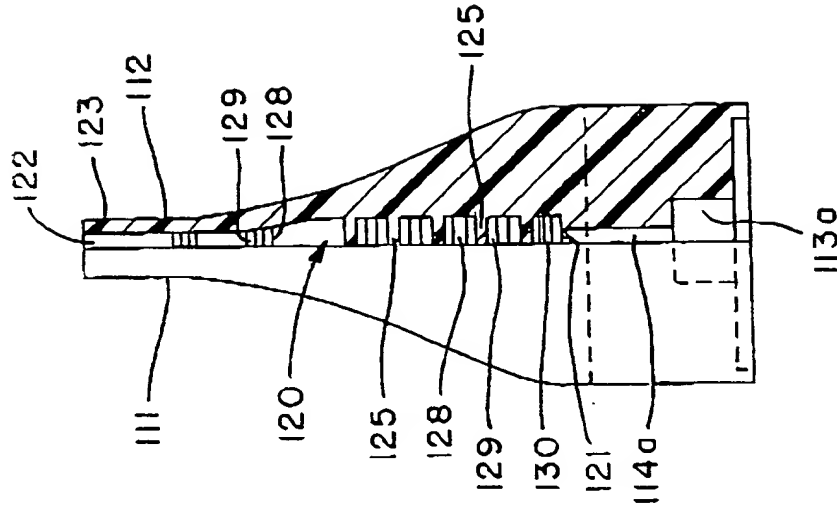


FIG. 17

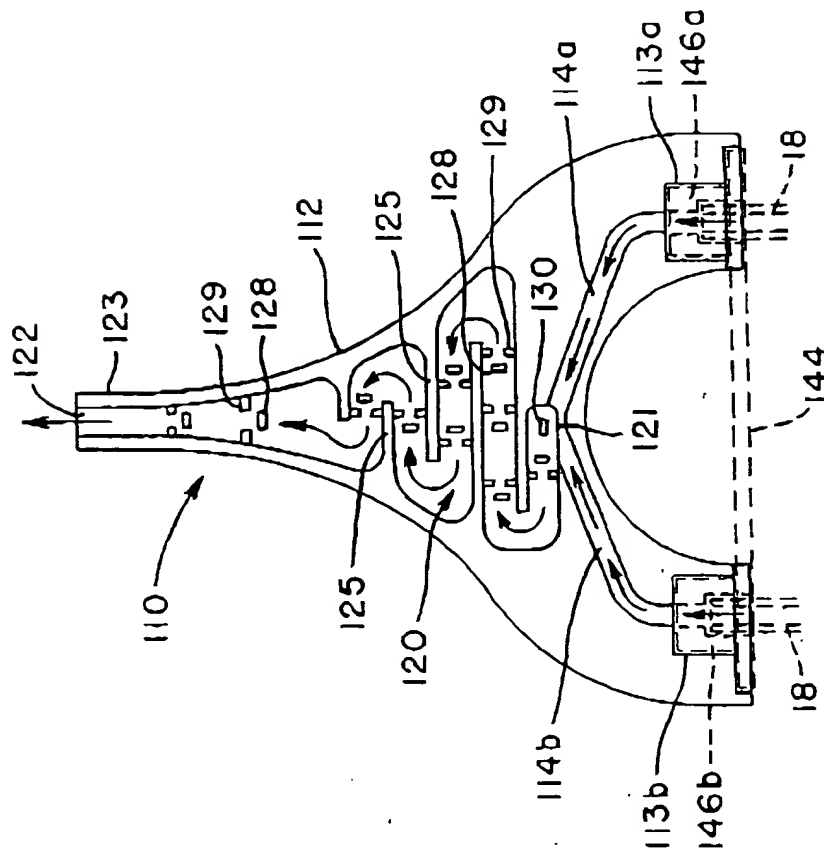


FIG. 16

Sheet No. 2

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
If none of the following sub-boxes is used, this sheet should not be included in the request.	
<p>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</p> <p>GRAY, Richard F. 150 Central Park West-Suite 3210 New York, NY 10019 United States of America</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality: US	State (that is, country) of residence: US
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</p> <p>ZISSEL, Ralf 107 Hollycock Lane Mooresville, NC 28117 United States of America</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality: DE	State (that is, country) of residence: US
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality:	State (that is, country) of residence:
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality:	State (that is, country) of residence:
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality:	State (that is, country) of residence:
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.	

Sheet No. 2

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
<p><small>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</small></p> <p>GRAY, Richard F. 150 Central Park West-Suite 3210 New York, NY 10019 United States of America</p>	<p><small>This person is:</small></p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality: US	State (that is, country) of residence: US
<p><small>This person is applicant for the purposes of:</small></p> <p><input type="checkbox"/> all designated States    <input type="checkbox"/> all designated States except the United States of America    <input checked="" type="checkbox"/> the United States of America only    <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><small>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</small></p> <p>ZISSEL, Ralph Ralf <del>107 Holly Cook Lane</del> 107 Hollycock Lane Mooresville, NC <del>28118</del> 28117 United States of America</p>	<p><small>This person is:</small></p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality: DE	State (that is, country) of residence: US
<p><small>This person is applicant for the purposes of:</small></p> <p><input type="checkbox"/> all designated States    <input type="checkbox"/> all designated States except the United States of America    <input checked="" type="checkbox"/> the United States of America only    <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><small>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</small></p>	<p><small>This person is:</small></p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality:	State (that is, country) of residence:
<p><small>This person is applicant for the purposes of:</small></p> <p><input type="checkbox"/> all designated States    <input type="checkbox"/> all designated States except the United States of America    <input type="checkbox"/> the United States of America only    <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><small>Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</small></p>	<p><small>This person is:</small></p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)</p>
State (that is, country) of nationality:	State (that is, country) of residence:
<p><small>This person is applicant for the purposes of:</small></p> <p><input type="checkbox"/> all designated States    <input type="checkbox"/> all designated States except the United States of America    <input type="checkbox"/> the United States of America only    <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.</p>	